

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

MONTHLY ESTIMATE

FOR THE MONTH OF NOV
SEPTEMBER 2009

Date: September 23, 2009CONTRACTOR: A'S MECHANICAL & BUILDERSADDRESS: ~~844 Factory Street~~ 3528 Aliamama StreetContract No. 58017City, State ZIP: HONOLULU, HI 96818DAGS Job No. 12-20-2600PROJECT TITLE: DIAMOND HEAD HEALTH CENTER - REROOFCONTRACTBasic Contract Amount \$ 755,000.00CHANGE ORDERSTotal \$ 41,010.00Adjusted Contract Amount \$ 796,010.00FOR INSPECTION BRANCH USE☐ SUBMITTAL REGISTER ☐ COMMENCEMENT REQUIREMENTSDUE MONTHLY:☐ PROJECT SCHEDULE - INITIAL & ONGOING☒ DAILY REPORTS☒ PAYROLL AFFIDAVITSMONTHLY ESTIMATE CHECKLIST☒ CONTRACT NUMBER☒ PROJECT NAME & LOCATION☒ ALL SIGNATURESWORK ACCOMPLISHEDBasic ContractChange OrderTotalCompleted to Date 63.29% \$ 477,815.00 100.00% \$ 41,010.00 \$ 518,825.00Retained REDUCED ☐ \$ 38,962.00 \$ 3,124.00 \$ 42,086.00Amount Subject to Payment \$ 438,853.00 \$ 37,886.00 \$ 476,739.00Payments to Date \$ 250,708.00 \$ - \$ 250,708.00Payments Now Due \$ 188,145.00 \$ 37,886.00 \$ 226,031.00Payment No. 3

Remarks:

1. Computed and Checked by:

[Signature] 12-09-09
3. Recommended: Project Inspector or Engineer Date:

[Signature] 12/09/2009
4. Recommended: Area Engineer/Architect Date:

[Signature] DEC 10 2009
5. Approved: Branch Chief or District Engineer Date:

The Public Works Administrator certifies that change orders have been issued and the work performed.

[Signature] 12/10/09
State Public Works Administrator Date:

2. I certify that the above bill is correct, just, that payment has not been received, and all payroll affidavits have been submitted, are current, or proper deductive exclusions have been made to this request.

A'S MECHANICAL & BUILDERS, LLC

Name of Contractor

By signature / Title:

Date:

BASIC CONTRACT - PRIME & SUB CONTRACTOR RETAINAGE CALCULATION

STATE OF HAWAII
Department of Accounting and General Services
Division of Public Works

For the Month of: SEPTEMBER 2009

CONTRACTOR: A'S MECHANICAL & BUILDERS, LLC
PROJECT TITLE: DIAMOND HEAD HEALTH CENTER - REROOF

Contract No.: 58017
DAGS Job No.: 12-20-2600

CLOSED			LICENSE	BASIC CONTRACT	COMPL.	%	RETN	CONTRACT
	PRIME CONTRACTOR	TRADE	NO.	AMOUNT	TO DATE	CMPL	%	AMOUNT
								RETAINED
	A'S MECH & BLDRS	General Contractor	BC-23109	\$755,000	\$477,815	63.29%	5%	\$23,890

SUBCONTRACTOR	TRADE	LICENSE NO.	BASIC SUB-CONTRACT AMOUNT	COMPL. TO DATE	% CMPL	RETN %	SUB-CONTRACT AMOUNT RETAINED
A&J Painting	Painting	C-27590	\$3,572	\$0	0.00%	10%	\$0
Aloha Steel	Steel Fabrication	C-18839	\$6,150	\$3,075	50.00%	10%	\$307
J&K Roofing	Roofing	C-19409	\$210,000	\$84,000	40.00%	10%	\$8,400
Elite Mechanical	Sheet Metal Flashing	C-25124	\$12,110	\$6,055	50.00%	10%	\$605
MVC Electrical	Electrical	C-25883	\$4,500	\$2,250 \$1,125	50.00%	10%	\$225
Ohana Environmental	Asbestos Removal	C-20571	\$18,077	\$18,077	100.00%	10%	\$1,807
Abbey Carpet	Title Work	C-19140	\$106,525	\$37,284	35.00%	10%	\$3,728
Total Retained from Subs							\$15,072

BASIC CONTRACT - RETAINED FROM PRIME AND SUBS (A+B)	\$38,962
---	----------

I certify that the above retentions are correct for this request.

A'S MECHANICAL & BUILDERS, LLC

Name of Contractor

By Signature Orlando V. Dineja Date Nov. 18, 2029

By Signature

Date _____

Checked/Verified by:

GF

Initial - Project Inspector or Engineer

NOTE:

Columnar totals shall be equal in dollar value to that on the Monthly Estimate Sheet

STATE OF HAWAII
DEPARTMENT OF ACCOUNTING AND GENERAL SERVICES
DIVISION OF PUBLIC WORKS
Monthly Payment Slip

PAYMENT NO.: 3

PROJECT TITLE: DIAMOND HEAD HEALTH CENTER - REROOF

BILLING MONTH: November-09

DAGS JOB NO.: 1 2-20-2600

CONTRACT NO.: 58017

CONTRACTOR: A'S MECHANICAL & BUILDERS, LLC

VENDOR CODE: 30690900

Original Contract Payment Suffix: 1

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
01	B08-408M	\$214,848.00	\$24,070.00	\$190,778.00
Totals:		\$214,848.00	\$24,070.00	\$190,778.00

Change Order Payment Suffix: 2, 3, 4

<u>Suffix</u>	<u>Fund Symbol</u>	<u>Amount Earned</u>	<u>Retainage</u>	<u>Amount Due</u>
02	B08-408M	\$35,067.00	\$2,824.00	\$32,243.00
03	B06-418M	\$2,531.00	-0-	\$2,531.00
04	B08-408M	\$479.00	-0-	\$479.00
Totals:		\$38,077.00	\$2,824.00	\$35,253.00
Grand Total:		\$252,925.00	\$26,894.00	\$226,031.00

Lloyd Ogata 12/11/2009
Verified By DATE

(This Section for Administrative Services Office Use Only)

Vendor Code 30690900

Cost Code 3A1

Voucher No. 12134 NSD

Verified By *my* 12/10/09